

Pharmacist: Phil Pill RPh.

Patient Name: Lucy Silver

Physician Name: Dr. Wu Zing

Rx# 5476

Rx. Date 04/1/2020

Exp. Date 4/1/2021

## Meds R US Pharmacy Controlled Drug Disposition Form

Drug Name: AtivanDrug Strength: 1 mgDrug Form: Tablet

Dose: 1 tab PO TID

## Allergic to PCN

Date Received: \_\_\_\_\_

Received By: \_\_\_\_\_

Amount Rec'd: \_\_\_\_\_

Amount Returned\_\_\_\_\_

[illegible]

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